

*Grimes Parks and Recreation Department presents...*

# Open Swimming Trips

- What:** The Grimes Parks and Recreation is once again sponsoring bus transportation and staff supervision to the Dallas Center Pool.
- Who:** Ages 6 and Up
- Time:** The bus picks up at the Grimes Library Shelter at 12:30pm & GCC at 12:45 pm and returns to the Library at 3:30pm and GCC at 3:45pm. Riders MUST ride both ways.
- Fee:** \$2.00 per child (includes bus/staff only)  
This does not cover the pool admission fee or any concession items
- \*No advance payments or accounts will be taken. Pay each day.
- \*Call Dallas Center to Purchase a Season or Punch Pass

Monday	Wednesday
June 3- Dallas Center Pool	June 5- Dallas Center Pool
June 10- Dallas Center Pool	June 12- Dallas Center Pool
June 17- Dallas Center Pool	June 19- Dallas Center Pool
June 24- Dallas Center Pool	June 26- Dallas Center Pool
July 1- Dallas Center Pool	July 3- <b>NO ACTIVITIES</b>
July 8- Dallas Center Pool	July 10- Dallas Center Pool
July 15- Dallas Center Pool	July 17- Dallas Center Pool
July 22- Dallas Center Pool	July 24- Dallas Center Pool
July 29- Dallas Center Pool	July 31- Dallas Center Pool
August 5- Dallas Center Pool	August 7- Dallas Center Pool

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## 2013 "Grimes Rec Open Swimming Trips" Registration Form

PARTICIPANT'S NAME: \_\_\_\_\_ DOB: \_\_\_\_\_ AGE: \_\_\_\_\_

PARENT/GUARDIAN'S NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

EMAIL: \_\_\_\_\_ Add Me to the Rec Email List: YES NO ALREADY

### Release and Indemnification Agreement:

I hereby request that you accept my child's application for registration in this Grimes Park and Recreation Department program. With consideration of your acceptance of my child, I hereby release the City of Grimes, its employees, and the coaches and volunteers associated with this program from all claims which may arise in the event my child is injured in an accident that occurs while he or she is participating in this program. I further agree to indemnify the City of Grimes, its employees, and the coaches and volunteers associated with this program for any claim, which may hereafter be presented on behalf of my child as a result of any such injuries. I hereby acknowledge that it is my responsibility, not the responsibility of the City of Grimes, to provide medical insurance coverage in the event I desire to have medical insurance coverage for my child while he or she participates in this particular activity. I will also allow pictures of my child during this program to be used only for the marketing purposes of future Grimes Parks and Recreation programs.

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date